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## BIB DATA SHEET

CONFIRMATION NO. 7447

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/599,967	10/16/2006	514	1614	PR60682USW		
<b>RULE</b>						
<b>APPLICANTS</b> Rakesh Kumar, Durham, NC; Robert John Mullin, Durham, NC; Tona M. Gilmer, Durham, NC;						
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US05/12337 04/12/2005 which claims benefit of 60/563,285 04/16/2004 and claims benefit of 60/605,288 08/27/2004						
<b>** FOREIGN APPLICATIONS *****</b>						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/31/2007						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and /ANNA PAGONAKIS/ Acknowledged Examiner's Signature		<input type="checkbox"/> Met after Allowance AP Initials	<b>STATE OR COUNTRY</b>	<b>SHEETS DRAWINGS</b>	<b>TOTAL CLAIMS</b>	<b>INDEPENDENT CLAIMS</b>
			NC	2	12	4
<b>ADDRESS</b>						
GLAXOSMITHKLINE CORPORATE INTELLECTUAL PROPERTY, MAI B475 FIVE MOORE DR., PO BOX 13398 RESEARCH TRIANGLE PARK, NC 27709-3398 UNITED STATES						
<b>TITLE</b>						
Cancer Treatment Method						
<b>FILING FEE RECEIVED</b>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		
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